

Work Order ID 94199

94199

Page 1

November-30-12 10:09:23 AM

Item ID: D3202-1

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Cover

Start Date: 12/13/12 Start Qty: 10.00

10

Cust Item ID:

Required Date: 12/13/12 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: ML5

Date: 12-12-04 Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3202	Rev D								
100		0.00							
100									
Waterjet	Memo	0.00							
FLOW CNC Waterjet	1-Cut as per Dwg D3202								
<u>5052 1032</u>	Dwg Rev: <u>0</u>								
	Prog Rev: <u>0</u>								
	2-Deburr if necessary								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110									
QC	Memo	0.00							
Quality Control									

(15)

B12-12-16

(15)

B12-12-16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 94199

94199

Page 2

November-30-12 10:09:23 AM

Item ID: D3202-1

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Cover

Start Date: 12/13/12 Start Qty: 10.00

10

Cust Item ID:

Required Date: 12/13/12 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

120

QC8- Inspect parts - second check

0.00

DAS

120

15
12-15-17

QC

Memo

0.00

Quality Control

130

Chemical Conversion Coat per QSI005 4.1

0.00

130

0.00

HandFinish

Memo

Hand Finishing

15-1-12-12-19
PTO

140

Grey Sandtex(Ref 4.3.5.6) per QSI005 4.3

0.00

140

0.00

Powdercoat

Memo

Powder Coating

START TIME: 9:20
OVEN TEMPERATURE: 300°
FINISH TIME: 9:50

14 6 12-12-20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; font-size: small;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input checked="" type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input checked="" type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
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Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>	12/12/20	130	2	Part scrap RC band when he scratched parts QTY ② R.C. caught in deburring machine	DAS 16 9-83 Q>Z42 12/12/20	Delayed no replace	12/12/20 DAS 15 9-83	12/12/20 Q>Z42 12/12/20	DAS 16 9-83																		
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																		

Work Order ID 94199

94199

Page 3

November-30-12 10:09:23 AM

Item ID: D3202-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Cover

Start Date: 12/13/12 Start Qty: 10.00

10

Cust Item ID:

Required Date: 12/13/12 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

NR1

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

150

QC3- Inspect Part Finish

0.00

150

QC

Memo

0.00

Quality Control

14. x 6 20 11/11/12
13 — 1

PTO

160

Identify as per dwg & Stock Location: 8241A 0.00

160

Packaging

Memo

0.00

Packaging

13x — 8
12-12-24

170

QC21- Final Inspection - Work Order Release

0.00

170

QC

Memo

0.00

Quality Control

13/1/10
MF
12-12-27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
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Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

November-30-12 10:09:22 AM

Page 1

Work Order ID: 94199

Parent Item: D3202-1

Parent Item Name: Cover

Start Date: 12/13/12

Required Date: 12/13/12

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP Rev:B No Longuer Made In House 05-11-06 JLM
 IPP Rev:C Now on Waterjet 07-04-18 JLM
 IPP Rev:D chg to revC as per dwg 08-04-21 DD verified by:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M5052H32S.032		Purchased	No			100	sf	151.8000	1.551	16.326316			
5052-H32 .032 Sheet													

1312-12-14

Location	Loc Qty	Loc Code
MAT020	53	
121660	53	
MAT022	98.8	
112664	10.4	
115638	12	
116657	9.5	
117798	20.9	
121030	23	
121040	23	

121660

(15)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

DART AEROSPACE LTD		Work Order:	94199
Description: Cover		Part Number:	D3202-1
Inspection Dwg: D3202 Rev: D		Page 1 of 1	

FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø0.38	+0.006/-0.001	.380	2		V B02	
0.63	+/-0.030	.633	2		V	
3.38	+/-0.030	3.384	2		V	
2.40	+/-0.030	2.399	2		V	
0.82	+/-0.030	.829	2		V	
73.84	+/-0.030	73.84	7		T B01	
74.50	+/-0.030	74.50	1		T	
0.032	+/-0.010	.031	2		V	
4.03 Pitch	+/-0.030	4.029	2		V	

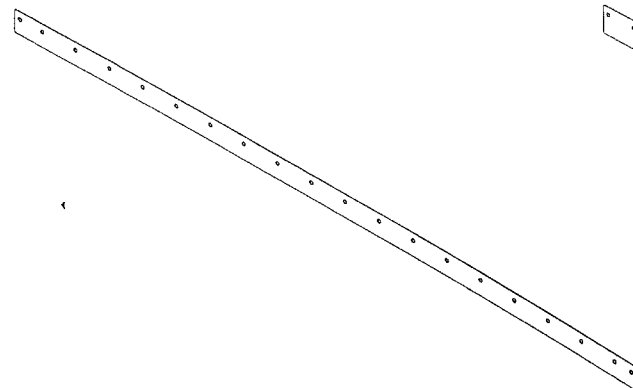
Measured by: IB	Audited by: DAS 15	Preliminary Approval:
Date: 12-12-16	Date: 12-12-17	Date:

Rev	Date	Change	Revised by	Approved
A	04.02.25	New Issue	KJ/RF	
B	06.09.28	Revised per Rev. B1	KJ/JLM	
C	08.07.23	Dimensions updated per Dwg Rev C	KJ/DD	
D	12.05.14	Dwg Rev updated	KJ	

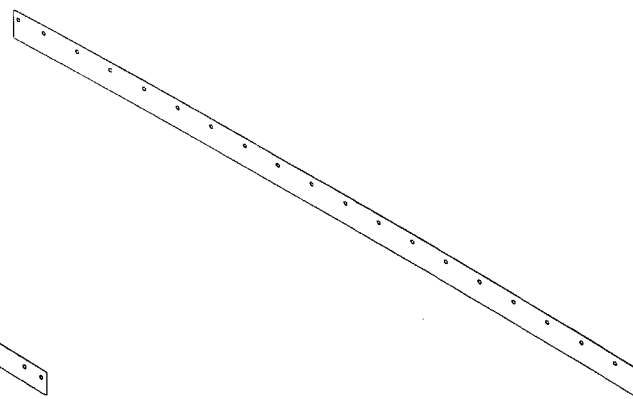
SKETCH
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO A REVISION
WITHOUT NOTICE
WORK ORDER

94199 ML5

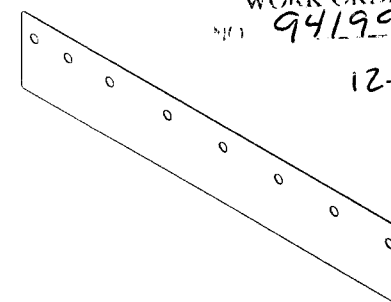
12-12-04



D3202-1 COVER



D3202-3 COVER
(COMPOSITE DOOR)



D3202-5 COVER
(HINGE PANEL DOOR MOD)

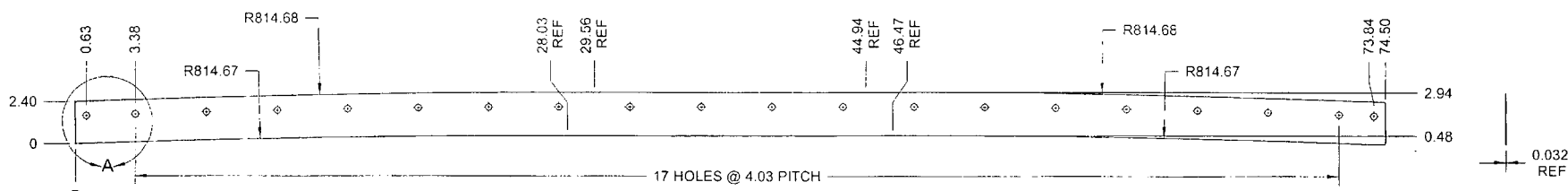
RELEASED
02-11-10-14

NOTES:

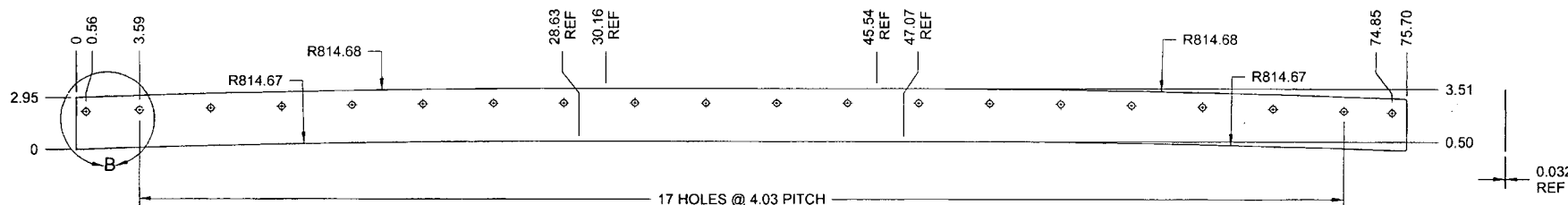
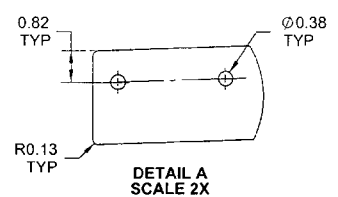
- 1) MATERIAL: 5052-H32 ALUMINUM SHEET, 0.032 THICK
PER AMS-QQ-A-250/8 OR AMS 4016
REF. DART SPEC M5052H32S.032
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
POWDER COAT GREY SANDTEX (4.3.5.6) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3202-X" USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 0.56 lbs APPROX FOR -1
: 0.61 lbs APPROX FOR -3
: 0.18 lbs APPROX FOR -5

D	ADD -5 FOR HINGE PANEL DOOR MOD.	AJS	08.11.03
C	ADD -3 FOR COMPOSITE DOOR. REFORMAT ENTIRE DRAWING TO SOLIDWORKS STANDARD. INCORPORATE CHANGE B1 (CLARIFY MID-SPAN DIMENSION)	AJS	08.03.31
B	RE-DESIGN PART NOW CURVED	CP	03.10.16
A	NEW ISSUE	CP	01.01.01
REV.	DESCRIPTION	BY	DATE
DESIGN	DS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA DRAWING NO. D3202 TITLE COVER COPYRIGHT © 2008 BY DART AEROSPACE LTD. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS OR IMPLICIT UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DRAWN	AJS		
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	08.11.03	REV. D SHEET 1 OF 3 SCALE NTS	

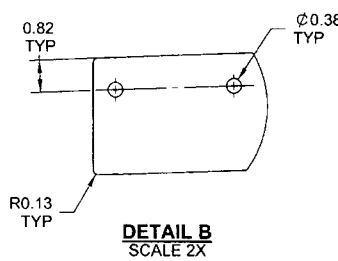
94199



D3202-1 COVER



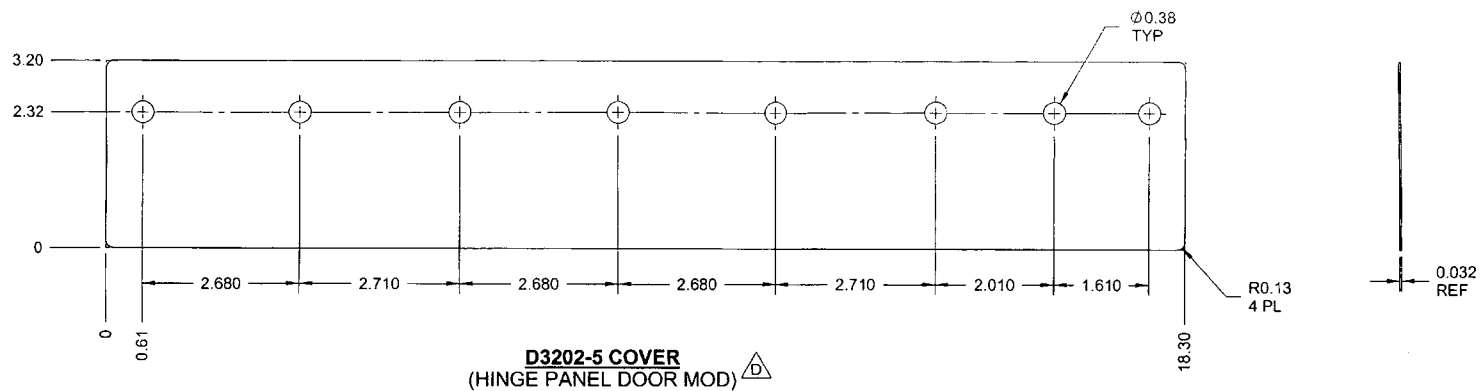
D3202-3 COVER
(COMPOSITE DOOR)



RELEASED
08.11.10

DESIGN	DS	DART AEROSPACE LTD	
DRAWN	MS	HAWKESBURY, ONTARIO, CANADA	
CHECKED	JS	DRAWING NO.	REV. D
MFG. APPR.	JS	D3202	SHEET 2 OF 3
APPROVED	AW	TITLE	SCALE
DE APPR.	AW	COVER	NTS
DATE	08.11.03	<small>COPYRIGHT © 2008 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR DISCLOSED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

94199



RELEASED
08.11.03

DESIGN	DS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED		DRAWING NO.	REV. D
MFG. APPR.		D3202	SHEET 3 OF 3
APPROVED		TITLE	SCALE
DE APPR.		COVER	NTS
DATE	08.11.03	<small>COPYRIGHT © 2008 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL. IT IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	